



RENEWAL
MANUFACTURED HOUSING BROKERS'S LICENSE

OFFICE OF HOUSING, BUILDINGS & CONSTRUCTION
MANUFACTURED HOUSING
101 SEA HERO ROAD, SUITE 100
FRANKFORT KY 40601-5405
(502) 573-1795 Fax (502) 573-1004

This application must be COMPLETED in detail or will not be reviewed. Return to the above address by the last day of your birth month or incorporation month date. All statements made herein are subject to the penalties of perjury as set forth in the Certificate at the end of the application.

All licenses will expire on the birth month of the Primary Owner or the month of Incorporation, whichever applies. Please submit the renewal fee of \$250.00. See payment option form enclosed.

1. Name of the Manufactured Housing Broker d.b.a.: _____
Primary Owners Birth Date: _____
2. Name of corporation if applicable: _____ Date of incorporation _____
3. Exact Lot Address:
Street: _____
City: _____ State: _____ Zip: _____
County: _____ Current Manufactured Housing Broker's License #: _____
Phone: _____ Fax: _____ E-mail _____
4. Mailing Address : _____ City: _____ State: _____ Zip: _____
5. ***** An Updated Certificate of Insurance MUST be attached.** Office of Housing, Buildings and Construction must be listed as the certificate holder. (See letterhead above for exact wording.)
7. Name of Chief Managing Officer : _____

***** Please note that if you do not send in this application and the required information by the last day of your birth month or incorporation date, your license will automatically be made inactive.**

THIS SECTION MUST BE INITIALED:

_____ (Initial) I am not in default of any student loans backed by the KHESS (Kentucky Higher Education Assistance Authority). I understand that if I am in default of any student loans backed by KHEAA, I cannot receive a **Kentucky Brokers License** at this time.

_____ (Initial) I confirm that all information contained in and submitted with this application is current and true to the best of my knowledge.

Signature of Applicant: _____ DATE: _____

